**Meeting Minutes**

CDS Family & Behavioral Health Services, Inc.

Meeting: CINS/FINS

Date: August 27, 2025

Time: 11:30 am

Location: Bivens, (Zoom)

Date of Next Meeting: September 17, 2025

Attendance: Phil, Cindy, Alex, Lyanne, Meagan, Jess, Brandi, Evelitza, Angie, Angela, Stone, Naomi (Zoom)

Absent: Brian, Zeke

**I. Business Operations:**

A. Monthly Budget (Revenue and Expenses)

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

B. Marketing and Business Development

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

C. Regulatory Issues

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

D. Human Resource Issues (Staffing and Training)

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

E. Annual Budget Planning and Process

*1. Sub-topic:* **Budget Oversight**

*Discussion:* Directors must keep a very close eye on budgets, especially with such low numbers. Shopping trips should not be frequent and receipts should not still be totaling close to previous full house numbers.

*Outcome, Actions, Timeframe:* **Please maintain an accurate accounting of your expenditures. Do not go over on your budgets. If you need to slightly overestimate, do that, but do not exceed what was requested.**

# II. Health and Safety: Program/Regional Directors

A. External Inspections

*1. Sub-topic:*  **Building Maintenance and Improvements Needed**

*Discussion:*  IYP-NW, Arlington Bldg. and East still have large maintenance needs.

*Outcome, Actions, Timeframe:* On-going

B. Self-Inspections (Reports, analysis, and recommendations)

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

C. Incident Reports (Reports, analysis of trends, recommendations)

*1. Sub-topic:* **UERs/CCCs**

*Discussion:*  There has been an absence of reports. Ensure to report all incidents that are reportable.

*Outcome, Actions, Timeframe:* On-going

# III. Quality Improvement

A. File Audits and Case Record Review (reports and recommendations)

*1. Sub-topic:* **Suicide Procedures/Documentation**

*Discussion:* QAD Alex has sent out information for training on Suicide Precaution Procedures to retrain everyone. Upon inspection of logbooks and files, this has not been being documented accurately.

*Outcome, Actions, Timeframe:* On-going

2. *Sub-topic:* **Logbook Procedures/Documentation**

*Discussion:* Please ensure that all staff are documenting required activities, safety and security issues, counts (3 per shift), inspections, screenings, assessments, supervision levels, and reviews in the logbook and in the chronological note section. Refer to the FL Network Policies and Procedures 5.3 for full explanation. Each staff with the Pxs is required to complete a 3 shift review on each shift worked. The Residential Supervisor and Residential Counselor is required to complete a logbook review of all the shifts that have passed since their last time in the program. The Residential Supervisor is also required to complete a check of the grievance box on each shift worked and document this in the chronological notes, writing that the box was checked and what was found. The Residential Supervisor is also required to complete a weekly logbook check and a review of cameras a minimum of once every 14 days, reviewing and documenting the activities of the facility, and include a random sample of overnight shifts. Residential Supervisors are also required to review contraband checks in –person and on video, as well as review the logbook to ensure that staff are conducting and documenting the contraband checks. All of this and more must be documented in the logbook in the chronological notes section as it occurs.

*Outcome, Actions, Timeframe:*

3. *Sub-topic:* **Logbook Revisions**

*Discussion:* Placement of Supervisor Review of cameras and logbook section.Zeke has a template for the logbook and will send to Alex.

*Outcome, Actions, Timeframe:*

*4. Sub-topic:* **Case File Procedures/Documentation**

*Discussion:* Please ensure that all staff are properly completing documentation for case files and applicable staff are signing off on their documentation in a timely manner. A case file should have the Nirvana completed at intake and this must be used to create the Individual Plan. ONLY trained staff can complete the Nirvana and Nirvana self-assessment. These documents must be signed immediately by the assigned counselor and then reviewed by the Supervisor within 2 days. Now, the Licensed Mental Health Professional for each site is required to review and sign these documents for non-licensed staff within 7 business days (Nirvana). Case notes must be completed for every intervention completed with a Px and must be placed in the file within 2 business days of completion. The service tally should also be completed, documenting each of these interventions as well as phone calls and visitors.

*Outcome, Actions, Timeframe:*

5. *Sub-topic:* **Clinical Supervision forms**

*Discussion:* QAD Alex has created a new Clinical Supervision form to replace the 2 (3) other forms that are potentially being used, or recommended to be used. The previously used, *Supervision & Utilization Tracking note* and the *Clinical Supervision tracking notes*, have been merged with the new DJJ form, MHSA 019, to be only one form that we will use from here on out. It should be up on the Intranet soon.

B. Outcome Management (status, reports, recommendations)

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

C. Accreditation and Regulatory Requirements

*1. Sub-topic:* **IYP-NW & East OBCAPs**

*Discussion:*  OBCAPs have been completed, submitted, accepted, and closed.

*Outcome, Actions, Timeframe:*

2. *Sub-topic:* **Shelter Menus**

*Discussion:* We have acquired a new dietician.

*Outcome, Actions, Timeframe:*

D. Policy and Procedure Updates and/or Review

*1. Sub-topic:* Policy and form update reminders

*Discussion:* New contract expectations and answers to follow-up questions were discussed*.*

*Outcome, Actions, Timeframe:* **Please discard old forms and rely on the Intranet ONLY. Staff should never create or use their own forms that have not been approved and placed on the intranet. If you would like to suggest a new or revised form, please submit to Cindy and we will discuss it at our next meeting. Staff are still using forms that are no longer valid.**

*2. Sub-topic:*

*Discussion:*

*Outcome, Actions, Timeframe:*

E. Participant Complaint and Grievance (specific and quarterly review of trends)

*1. Sub-topic:*

*Discussion:*

*Outcome, Actions, Timeframe:*

F. Planning Documents (reports, status of goals and objectives, reformulation)

*1. Sub-topic:* **Strategic Plan**

*Discussion:*

*Outcome, Actions, Timeframe:*

*2. Sub-topic:* **Accessibility Plan**

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

*3. Sub-topic:* **Cultural Competence Plan**

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

*4. Sub-topic:* **Input Plan**

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

*5. Sub-topic:* **Community Relations plan**

*Discussion:*  Briefly discussed MOUs and progress toward completion.

# *Outcome, Actions, Timeframe:* ASAP

# IV. Risk Management

A. Risk Management Plan (exposure to loss)

*1. Sub-topic:* **Search policy updates and related procedural changes**

*Discussion:* Conducting more searches. Conducting more camera reviews. Documenting all these activities properly.QAD Alex will review logbooks when onsite to ensure compliance.

*Outcome, Actions, Timeframe:* On-going.

*2.**Sub-topic:* **Cellphone Usage on the floor while supervising Pxs**

*Discussion:*  Per Phil in our last meeting, no staff that is supervising Pxs is allowed to be on their phone. This was thoroughly discussed in our meeting. This includes headphones/earbuds of any kind. Some sites have walkie talkies and if not, they are approved for purchase. The actual policy is still being worked on.

*Outcome, Actions, Timeframe:*

*3.**Sub-topic:* **Supervision of Pxs**

*Discussion:*  NO staff should ever leave Pxs unattended or leave another staff over ratio. The CCC is requesting video footage for more incidents now and this is also a huge safety issue as well. This was also discussed in our last meeting, but is still occurring. Staff should not let Pxs roam around shelter ever. Staff should never prop/or leave open/unlocked doors that are meant to be locked (e.g. control room doors, laundry room doors, chemical rooms etc.).

*Outcome, Actions, Timeframe: On-going*

B. Employee Concerns or Complaints

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

C. Potential regulatory audits and/or investigation of operations

*1. Sub-topic:* **QI Audit & document completion**

*Discussion:*  All staff must ensure that all documents/data are submitted within required time frames and files are always kept up to date. We no longer can be guaranteed that QI will be a year from the pervious. We need to expect it at any time now.

*Outcome, Actions, Timeframe:*

# V. Information Technology

A. Technology Plan

*1. Sub-topic:*

*Discussion:*

*Outcome, Actions, Timeframe:*

# VI. Clinical/Program

A. Medical and Medication Issues

*1. Sub-topic:* **RN requirements**

*Discussion:* All RNs are required to complete a health screening on every child admitted, preferably at intake, but within at least 24 hours of intake.Following the health screening and review of information, the RN is required to write in the chronological Progress Notes the results of the health screening and about any medications the Px may be taking. RNs should also be clearing discrepancies form the Pyxis daily, and pulling reports to have available for QI. RNs should also be overseeing the self-administration of medications and creating MARs when they are on-site.

*Outcome, Actions, Timeframe:* On-going

*2.* *Sub-topic:* **COVID procedures and building cleanliness**

*Discussion:* COVID seems to be coming around again, as well as other ailments. We need to ensure that all cleaning and sanitizing protocols are being completed every shift to ensure safe and healthy environments.

*Outcome, Actions, Timeframe:*

B. Counseling and Programming Issues

*1. Sub-topic:* **Bed check supervision**

*Discussion:* Two staff must be present during overnight shift. 2 male staff can be on shift together. However, if there is not a male and a female staff on shift, this will be documented on the schedule stating that whomever is on shift, are the only staff available. This is opposed to ensuring the Director document this in the logbook for each overnight shift. Also, we cannot have 3 staff on duty when the Px number does not warrant 3 staff, despite the makeup of staff that are scheduled.

*Outcome, Actions, Timeframe:*

**VII. Other Business:**

*1. Sub-topic:*

*Discussion:*

*Outcome, Actions, Timeframe:*

*2.* *Sub-topic:*

*Discussion:*

*Outcome, Actions, Timeframe:*

Respectfully submitted by:

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| Cynthia Starling |  | August 27, 2025 |

Name Date